

STATEMENT OF ECONOMIC INTERESTS

FILED

Date Received
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FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

FEB 14 2012

Please type or print in ink.

NAME OF FILER

(LAST)

Connelly

12 MAR -7 PM 12:43
WilliamCANDACE J. GRUBBS
Butte County Clerk-Recorder

(MIDDLE)

Francis

1. Office, Agency, or Court

Agency Name

Butte County Board of Supervisors

Division, Board, Department, District, if applicable

Board of Supervisors

Your Position

District 1 Supervisor

► If filing for multiple positions, list below or on an attachment.

Agency: Butte County and Attached list of boards

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State☐ Judge or Court Commissioner (Statewide Jurisdiction)☐ Multi-County _____☒ County of Butte☐ City of _____☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.☐ Assuming Office: Date assumed ____/____/____☐ The period covered is ____/____/____, through the date of leaving office.☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☐ Schedule A-1 - Investments - schedule attached☐ Schedule C - Income, Loans, & Business Positions - schedule attached☒ Schedule A-2 - Investments - schedule attached☒ Schedule D - Income - Gifts - schedule attached☒ Schedule B - Real Property - schedule attached☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I have used all reasonable diligence in preparing this statement. I have reviewed herein and in any attached schedules is true and complete. I acknowledge this

I certify under penalty of perjury under the laws of the State of California that

Date Signed

10 Feb 2012
(month, day, year)

Signature

RECEIVED FEB 14 2012

2011 Statement of Economic Interests Form 700

Additional Agencies/Positions

| | |
|---|--------------|
| Butte County Association of Governments | Board Member |
| Butte County Air Quality Board | Board Member |
| LAFCO | Board Member |
| Indian Gaming Board | Board Member |
| ORAC | Board Member |
| Sutter-Butte Flood Control Agency | Board Member |
| Biggs-Gridley Hospital JPA | Board Member |
| Northern Sacramento Valley Integrated Regional Water Management Group | |
| CA Integrated Waste Management Task Force | Board Member |

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <u>William F. Connelly</u> |

| | |
|--|--|
| 1. BUSINESS ENTITY OR TRUST | |
| Connelly's Professional Services | |
| Name 5280 Lower Wyandotte Road Oroville, CA 95966 | |
| Address (Business Address Acceptable) | |
| Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2 | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY General & Roofing Contractor | |
| FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED |
| NATURE OF INVESTMENT <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| YOUR BUSINESS POSITION <u>owner/contractor</u> | |

| | |
|---|---|
| 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | |
| <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000 |

| |
|--|
| 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) |
| <u>see attached list</u> |

| | |
|--|--|
| 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | |
| Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY | |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property | |
| Description of Business Activity or City or Other Precise Location of Real Property | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED |
| NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership <input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached | |

| | |
|--|--|
| 1. BUSINESS ENTITY OR TRUST | |
| Connelly's Enterprises | |
| Name 5280 Lower Wyandotte Road Oroville, CA 95966 | |
| Address (Business Address Acceptable) | |
| Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2 | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY licensed gun broker | |
| FAIR MARKET VALUE <input checked="" type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED |
| NATURE OF INVESTMENT <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| YOUR BUSINESS POSITION <u>owner</u> | |

| | |
|--|--|
| 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) | |
| <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 |

| |
|--|
| 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) |
| |

| | |
|--|--|
| 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | |
| Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY | |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property | |
| Description of Business Activity or City or Other Precise Location of Real Property | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED |
| NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership <input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached | |

Comments: _____

2011 Jobs Over \$10,000

| | |
|------------------|--------|
| YMCA | 14,846 |
| Robert's Drugs | 37,000 |
| Gary Taylor | 50,000 |
| Jerry Fitzgerald | 14,360 |
| Mike Panecaldo | 13,950 |

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name _____

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

5546 Debby Avenue

CITY

Oroville, CA 95966

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

_____/_____/11 06/_____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

lost in foreclosure/bankruptcy

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

_____/_____/11 ____/_____/11
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

Bank of America Home Loans

ADDRESS (Business Address Acceptable)

PO Box 5170

BUSINESS ACTIVITY, IF ANY, OF LENDER

Simi Valley, CA 93062

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☒ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: _____

SCHEDULE D **Income – Gifts**

Name

William F. Connelly
NAME OF SOURCE
Irv Leen

ADDRESS (Business Address Acceptable)

1506 O'Neal Road

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Oroville, CA 95965

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|---------------------------|
| <u>02 / 03 / 11</u> | <u>\$ 50.00</u> | <u>farm bureau dinner</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

NAME OF SOURCE
Recology

ADDRESS (Business Address Acceptable)

2720 S. Fifth Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Oroville, CA 95965

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|--------------|------------------------|
| <u>01 / 27 / 11</u> | <u>\$ 30</u> | <u>Chamber Dinner</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

NAME OF SOURCE
Ducks Unlimited

ADDRESS (Business Address Acceptable)

15 Manila Way

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Oroville, CA 95966

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|--------------|------------------------|
| <u>03 / 11 / 11</u> | <u>\$ 50</u> | <u>dinner ticket</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

NAME OF SOURCE
Angela Mastelotto

ADDRESS (Business Address Acceptable)

1226 Mt. Ida Road

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Oroville, CA 95966

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|--------------|------------------------|
| <u>02 / 24 / 11</u> | <u>\$ 50</u> | <u>OEDCO dinner</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

NAME OF SOURCE
Jim Ledgerwood

ADDRESS (Business Address Acceptable)

254 Picholine Way

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Chico, CA

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|---------------|-----------------------------|
| <u>04 / 02 / 11</u> | <u>\$ 225</u> | <u>Safari Intn'l Dinner</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

Comments: _____